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To: Examiner Brian K. Green, Art Unit 3611
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Date: July 6, 2006
Re: Response to Office Action
Application No. 10/799,611
Total Pages: 15 (including cover)
File Number: K8000143US3B
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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

Application Number	10/799,611
Filing Date	03/15/2004
First Named Inventor	Kristoffer Hess
Art Unit	3611
Examiner Name	Brian K. Green
Attorney Docket Number	K8000143US3B

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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T-182 P.03 Job-219

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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. K8000143US3B	
Applicant(s): Hess et al.						
Application No. 10/799,611	Filing Date 03/15 2005	Examiner Brian K. Green	Customer No. 34236	Group Art Unit 3611	Confirmation No. 8421	
Invention: FLAME SIMULATING ASSEMBLY						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	2	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 501613 in the amount of \$0.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 501613 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: July 6, 2006			
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